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Bib Data Sheet

CONFIRMATION NO. 5887

<b>SERIAL NUMBER</b> 10/083,563	<b>FILING DATE</b> 02/27/2002 <b>RULE</b>	<b>CLASS</b> <del>707</del> 706	<b>GROUP ART UNIT</b> <del>2171</del> 2121	<b>ATTORNEY DOCKET NO.</b> 04329.2743
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**\*\* CONTINUING DATA \*\*\*\*\***

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
JAPAN 2001-229500 07/30/2001

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 03/21/2002**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 21	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 4
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Verified and Acknowledged  
Examiner's Signature: [Signature] Initials: [Initials]

**ADDRESS**  
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**TITLE**  
Knowledge analysis system, knowledge analysis method, and knowledge analysis program product

<b>FILING FEE RECEIVED</b> 842	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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